UI11A Revised 2011
STATE OF NEBRASKA
DEPARTMENT OF LABOR
UNEMPLOYMENT INSURANCE TAX
P O BOX 94600
LINCOLN NE 68509-4600
DE 402 471 9994

Print Preparer's Name:

Revised 2011

ADJUSTMENT FORM 11A

Ph: 402.471.9898 Fax: 402.471.9994		17						
Employer Name]			er				
AMENDMENT TO COMBINED TAX REPORT – (UI – 11T)					YR		QTF	₹
If combined tax has been overpaid, a credit will be established on has been underpaid, enclose a payment for the additional combin calculated at 1.5% per month from quarterly due date.		nterest				SHOL	LD BE	
		Dolla	PORTED	Cents		Dollars	LD BE	Cents
Gross wages paid for covered employment during the quarter	\$	Dolla		Cents	\$	Dollars		Ochio
3. Wages in excess (For 2007 and after = \$9,000)					\$			
4. Total Taxable Wages (subtract line 3 from line 2)	\$				\$			
5. Your COMBINED TAX Rate is	, , , , , , , , , , , , , , , , , , ,				*			%
6. Enter COMBINED TAX PAYMENTS DUE for this quarter. Multiply line 4 by line 5					\$			
7. Adjustment	\$ \$				\$			
Reason for Adjustment:								
ADJUSTMEN AMENDMENT TO WAGE REPORT – (UI – 11W)	NT FORM 11A		Er	nployer	· Account	Number		
If gross wages were changed in the SHOULD BE column above, that require corrections. Social security numbers must be include								
					YR		QTF	₹
SOCIAL SECURITY NUMBER		GRO	SS WAGES P		CH COVER	RED EM	PLOYEE IN	I THIS
Loot Name de	yee's Name st Initial, 2nd Initial		AS REPORT				SHOULD BE	
000 00 0000 000 00 000 Last Name, 1s	st iiitiai, Ziiu iiitiai		Dollars	Ce	nts	Dolla	irs	Cents
				+	$\dashv \vdash$			
Reason for Adjustment:								
reacent for majurations.								

Phone

Date